

County: Pierce
 ELLSWORTH CARE CENTERS
 405 NORTH MAPLE STREET

Facility ID: 7160

Page 1

ELLSWORTH 54011 Phone: (715) 273-5821
 Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/01): 71
 Total Licensed Bed Capacity (12/31/01): 77
 Number of Residents on 12/31/01: 61

Ownership:
 Highest Level License:
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 64

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		29.5
Supp. Home Care-Personal Care	No					1 - 4 Years		44.3
Supp. Home Care-Household Services	No	Developmental Disabilities	3.3	Under 65	6.6	More Than 4 Years		26.2
Day Services	No	Mental Illness (Org./Psy)	26.2	65 - 74	16.4			-----
Respite Care	Yes	Mental Illness (Other)	0.0	75 - 84	37.7			100.0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	31.1	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.6	95 & Over	8.2	Full-Time Equivalent		
Congregate Meals	No	Cancer	3.3		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	Yes	Fractures	4.9		100.0	(12/31/01)		
Other Meals	Yes	Cardiovascular	19.7	65 & Over	93.4	-----		
Transportation	No	Cerebrovascular	16.4		-----	RNs		7.5
Referral Service	No	Diabetes	3.3	Sex	%	LPNs		18.4
Other Services	Yes	Respiratory	4.9		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	16.4	Male	36.1	Aides, & Orderlies		
Mentally Ill	No		-----	Female	63.9			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	Yes				100.0			

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care		Managed Care			Total Resi - dents	% Of All	
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)				
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	9	100.0	341	31	77.5	94	1	100.0	124	9	81.8	124	0	0.0	0	0	0.0	0	82.0
Intermediate	---	---	---	7	17.5	78	0	0.0	0	2	18.2	114	0	0.0	0	0	0.0	0	14.8
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	2	5.0	137	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3.3
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	9	100.0		40	100.0		1	100.0		11	100.0		0	0.0		0	0.0	61	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	14.7	Daily Living (ADL)	Independent			
Private Home/With Home Health	0.9	Bathing	0.0	44.3	55.7	61
Other Nursing Homes	0.0	Dressing	14.8	27.9	57.4	61
Acute Care Hospitals	81.7	Transferring	36.1	26.2	37.7	61
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	27.9	31.1	41.0	61
Rehabilitation Hospitals	0.0	Eating	65.6	11.5	23.0	61
Other Locations	2.8	*****				
Total Number of Admissions	109	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	4.9	Receiving Respiratory Care		3.3
Private Home/No Home Health	28.9	Occ/Freq. Incontinent of Bladder	37.7	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	9.6	Occ/Freq. Incontinent of Bowel	39.3	Receiving Suctioning		0.0
Other Nursing Homes	0.0			Receiving Ostomy Care		0.0
Acute Care Hospitals	33.3	Mobility		Receiving Tube Feeding		3.3
Psych. Hosp. -MR/DD Facilities	0.9	Physically Restrained	8.2	Receiving Mechanically Altered Diets		23.0
Rehabilitation Hospitals	0.0					
Other Locations	2.6	Skin Care		Other Resident Characteristics		
Deaths	24.6	With Pressure Sores	3.3	Have Advance Directives		95.1
Total Number of Discharges		With Rashes	1.6	Medications		
(Including Deaths)	114			Receiving Psychoactive Drugs		54.1

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Peer Group Ratio	Bed Size: 50-99 Peer Group Ratio	Licensure: Skilled Peer Group Ratio	All Facilities %	Ratio			
Occupancy Rate: Average Daily Census/Licensed Beds	83.8	82.7	1.01	85.1	0.99	84.6	0.99		
Current Residents from In-County	0.0	82.1	.	80.0	.	82.7	.	77.0	0.00
Admissions from In-County, Still Residing	.	18.6	.	20.9	.	21.6	.	20.8	0.00
Admissions/Average Daily Census	170.3	178.7	0.95	144.6	1.18	137.9	1.23	128.9	1.32
Discharges/Average Daily Census	178.1	179.9	0.99	144.8	1.23	139.0	1.28	130.0	1.37
Discharges To Private Residence/Average Daily Census	68.8	76.7	0.90	60.4	1.14	55.2	1.25	52.8	1.30
Residents Receiving Skilled Care	82.0	93.6	0.88	90.5	0.91	91.8	0.89	85.3	0.96
Residents Aged 65 and Older	93.4	93.4	1.00	94.7	0.99	92.5	1.01	87.5	1.07
Title 19 (Medicaid) Funded Residents	65.6	63.4	1.03	58.0	1.13	64.3	1.02	68.7	0.95
Private Pay Funded Residents	18.0	23.0	0.78	32.0	0.56	25.6	0.71	22.0	0.82
Developmentally Disabled Residents	3.3	0.7	4.67	0.9	3.58	1.2	2.79	7.6	0.43
Mentally Ill Residents	26.2	30.1	0.87	33.8	0.77	37.4	0.70	33.8	0.78
General Medical Service Residents	16.4	23.3	0.70	18.3	0.89	21.2	0.77	19.4	0.84
Impaired ADL (Mean)	57.7	48.6	1.19	48.1	1.20	49.6	1.16	49.3	1.17
Psychological Problems	54.1	50.3	1.08	51.0	1.06	54.1	1.00	51.9	1.04
Nursing Care Required (Mean)	4.3	6.2	0.69	6.0	0.71	6.5	0.66	7.3	0.59